

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES
(Schedule E)

 PAGE 1 OF 4
 FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full) Senate Majority PAC			FEC IDENTIFICATION NUMBER ▼ C C00484642		
Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y					
Full Name of Payee Blueprint Interactive			Date of Public Distribution/Dissemination 09 / 13 / 2016		
Mailing Address 1155 Connecticut Ave NW Ste 601			Amount 79800.00		
City Washington		State DC	Zip Code 20036-4306		Transaction ID : VN7GBA3DZV0
Purpose of Expenditure Online Advertising - Estimate		Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Kelly Ayotte			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>NH</u>
Calendar Year-To-Date Per Election for Office Sought 6656286.97			Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
Full Name of Payee Shorr Johnson Magnus			Date of Public Distribution/Dissemination 09 / 14 / 2016		
Mailing Address 100 N 20th St Ste 201			Amount 22191.28		
City Philadelphia		State PA	Zip Code 19103-1454		Transaction ID : VN7GBA3E008
Purpose of Expenditure Media Production Costs - Estimate		Category/Type 		Date of Disbursement or Obligation M M / D D / Y Y Y Y Y Y	
Name of Federal Candidate Patrick J. Toomey			<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>PA</u>
Calendar Year-To-Date Per Election for Office Sought 7610171.90			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____		
(a) SUBTOTAL of Itemized Independent Expenditures..... ▶			101991.28		
(b) SUBTOTAL of Unitemized Independent Expenditures ▶					
(c) TOTAL Independent Expenditures..... ▶					
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.					
Signature <i>Rebecca Lambe</i>		[Electronically Filed]		Date 09 / 15 / 2016	

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Full Name of Payee Shorr Johnson Magnus		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 14 / 2016	
Mailing Address 100 N 20th St Ste 201		Amount 910.21	
City Philadelphia	State PA	Zip Code 19103-1454	Transaction ID : VN7GBA3E016
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Patrick J. Toomey		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee SKDKnickerbocker		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2016	
Mailing Address 1150 18th St NW Ste 800		Amount 1350.00	
City Washington	State DC	Zip Code 20036-3845	Transaction ID : VN7GBA3DZT3
Purpose of Expenditure Media Production Costs - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Kelly Ayotte		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	2260.21
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Rebecca Lambe

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Date

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Check if <input type="checkbox"/> 24-hour report <input checked="" type="checkbox"/> 48-hour report		<input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2016
Mailing Address 3050 K St NW Ste 100		Amount 352856.00
City Washington	State DC	Zip Code 20007-5108
Purpose of Expenditure Media Buy	Category/ Type	Transaction ID : VN7GBA3DZW8 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Kelly Ayotte	<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: NH
Calendar Year-To-Date Per Election for Office Sought 6656286.97		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

Full Name of Payee Waterfront Strategies		Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2016
Mailing Address 3050 K St NW Ste 100		Amount 166000.00
City Washington	State DC	Zip Code 20007-5108
Purpose of Expenditure Media Buy - Estimate	Category/ Type	Transaction ID : VN7GBA3DZX6 Date of Disbursement or Obligation MM / DD / YYYY
Name of Federal Candidate Kathleen A. McGinty	<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA
Calendar Year-To-Date Per Election for Office Sought 7610171.90		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	518856.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2016		
Mailing Address 3050 K St NW Ste 100			Amount 948309.00		
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GBA3DZY4		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Patrick J. Toomey		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought		7610171.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

Full Name of Payee Waterfront Strategies			Date of Public Distribution/Dissemination MM / DD / YYYY 09 / 13 / 2016		
Mailing Address 3050 K St NW Ste 100			Amount 430623.00		
City Washington	State DC	Zip Code 20007-5108	Transaction ID : VN7GBA3DZZ2		
Purpose of Expenditure Media Buy - Estimate		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY		
Name of Federal Candidate Patrick J. Toomey		<input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: PA		
Calendar Year-To-Date Per Election for Office Sought		7610171.90	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶		

(a) SUBTOTAL of Itemized Independent Expenditures..... ▶	1378932.00
(b) SUBTOTAL of Unitemized Independent Expenditures ▶	
(c) TOTAL Independent Expenditures..... ▶	2002039.49

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